\* Required

## **TTIF Transit Projects**

Please use this form to submit a nomination for a capital transit project to the Transportation Commission for addition to the annual prioritization process. A UDOT representative may contact you following this submission to confirm the information provided in the nomination form.

Sponsor Information Please enter information about the person submitting the nomination.  2. Name *  3. Title *  4. Address *  5. Phone Number *  6. Email Address *  7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.  Yes	1. Email address *	
3. Title *  4. Address *  5. Phone Number *  6. Email Address *  7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.		on submitting the nomination.
4. Address *  5. Phone Number *  6. Email Address *  7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.	2. <b>Name *</b>	
5. Phone Number *  6. Email Address *  7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.	3. Title *	
6. Email Address *  7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.	4. Address *	
6. Email Address *  7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.		
7. Are you duly authorized by the local government or district you represent to submit the nomination? *  Mark only one oval.	5. Phone Number *	
nomination? *  Mark only one oval.	6. Email Address *	
Mark only one oval.	7. Are you duly authorized by the loc nomination? *	cal government or district you represent to submit this
Yes		
	Yes	

## **Project Information**

Please provide the following information about the project.

8	Please provide a detailed description of the project. *
9	What is the estimated total cost of the project? (2019 Dollars)
10	A funding or in-kind match of 40% is required for this project to be considered; please explain how this requirement will be met, including the funding source. *
11.	Is this a fixed guideway project? *  Mark only one oval.
	Yes Skip to question 11.
	No Skip to question 12.
40	Iditional Project Information
12	Is the project identified in Phase 1 of the Long Range Plan or a Phase 1 need? (See <a href="https://www.udot.utah.gov/main/f?p=100:pg:0:::1:T,V:272">https://www.udot.utah.gov/main/f?p=100:pg:0:::1:T,V:272</a> , for more information) *  Mark only one oval.
	Yes
	No No
	aintenance and Operations Plan ase answer the following questions about the project's maintenance and operations plan.
13	Does this project have an ongoing funding plan for maintenance and operations? * Mark only one oval.
	Yes
	No

14. Please described the ongoing funding plan for funding source.	maintenance and operations, including the		
15. If you are a local government, have you consulted with the transit operator to determine if the maintenance and operation plan is consistent with the transit operator's maintenance and operations planning? *  Mark only one oval.			
Yes No N/A			
A copy of your responses will be emailed to the address	s you provided		
Devices of his			

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